



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/667,827
		Filing Date	September 22, 2000
		First Named Inventor	FRIED et al.
		Group Art Unit	3732
		Examiner Name	C. O'Connor
Total Number of Pages in This Submission		Attorney Docket Number	099488-2

RECEIVED
 OCT 28 2003
 T-8100 MAIL ROOM

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment: Supplemental Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Reissue Application Declaration by the Inventors (P Fried) 2. Reissue Application: Consent of Assignee; Statement of Non-Assignment (P Fried) 3. Statement Under 37 CFR 3.73(b) (P Fried)
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas W. Cole, Reg. No.: 28,290 Jerome W. Massie, Reg. No. 48,118 Nixon Peabody LLP 401 9th Street, N.W., Suite 900 Washington, DC 20004-7128
Signature	
Date	October 24, 2003

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
Date	Signature
	Typed or printed name



Application Serial No. 09/667,827
Attorney Docket No. 099488-2

T.H.
10-29-03
#12/Supply
Response
w/attest

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Paula S. Fried et al.)
Serial No. : 09/667,827) Examiner: C. O'Connor
Filed : September 22, 2000)
Title : DENTAL IMPLANTS AND) Art Unit: 3732
METHODS FOR EXTENDING)
SERVICE LIFE)

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at (703) 308-2708, on October, 2003.

Norma Slaveter

SUPPLEMENTAL RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
OCT 28 2003
TC 3700 MAIL ROOM

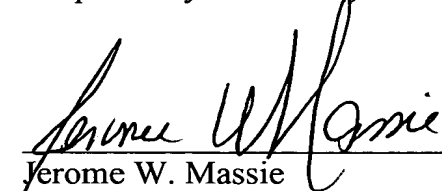
Dear Sir:

In further response to the Examiner's Office Action mailed July 22, 2003, and as a supplement to the Amendment filed October 22, 2003, please find attached a signed Reissue Application Declaration by the Inventor, a signed Reissue Application: Consent Of Assignee and a signed Statement Of Non-Assignment and Statement Under 37 CFR 3.73(b) each executed by inventor and assignee Paula Fried.

Having responded to all objections and rejections set forth in the outstanding Office Action, it is submitted that claims 1-12 and 15 are in condition for allowance. An early and favorable Notice of Allowance is respectfully solicited. In the event that the Examiner is of the opinion that a brief telephone or personal interview will

facilitate allowance of one or more of the above claims, the Examiner is courteously requested to contact Applicants' undersigned representative.

Respectfully submitted,



Jerome W. Massie
Registration No. 48,118

NIXON PEABODY LLP
401 9th Street, N.W., Suite 900
Washington, DC 20004-2128
Office: (202) 585-8219
Facsimile: (202) 585-8080

Dated: October 24, 2003